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MEMORANDUM

TO: Vermont Mental Health Performance Indicator Project
Advisory Groups and Interested Parties

FROM: John Pandiani
Lucille Schacht
Dongdong Lin

DATE: June 5, 1998

RE: Three Measures of Access to CRT Services

This week's performance indicator takes a different approach to measuring access to services than the indicators of access that we have recently shared with you. Over the past few weeks, we have distributed measures of the accessibility of mental health services that are based on two objective measures: the number of people served and program funding levels. This week, we are looking at access to care from the subjective perspective of the people served. In this case, the evaluation is based on the recent DDMHS MHSIP survey of people who were served by CRT programs in Vermont during January through June 1997.

The attached pages include tabular and graphic presentations of consumers' evaluation of access to care, and a list of the questionnaire items that were used to construct this scale.

We found it to be interesting to compare these subjective evaluations of the accessibility of CRT services to the more objective measures that were distributed on April 30 and May 21. Statistically, consumers' subjective evaluations are not related to the two objective measures. The relationship between the two objective measures, however, is substantial and significant. A graphic comparison of the three measures is also attached.

Consumer Survey Items in the MHSIP Access Scale

Questions:

- Q3. Location of services is convenient.
- Q4. Staff are willing to see me as I see necessary.
- Q6. Staff return my calls within 24 hours.
- Q7. Services are available at times that are good for me.
- Q8. I am able to get the services I need.

Response Categories:

Strongly Agree

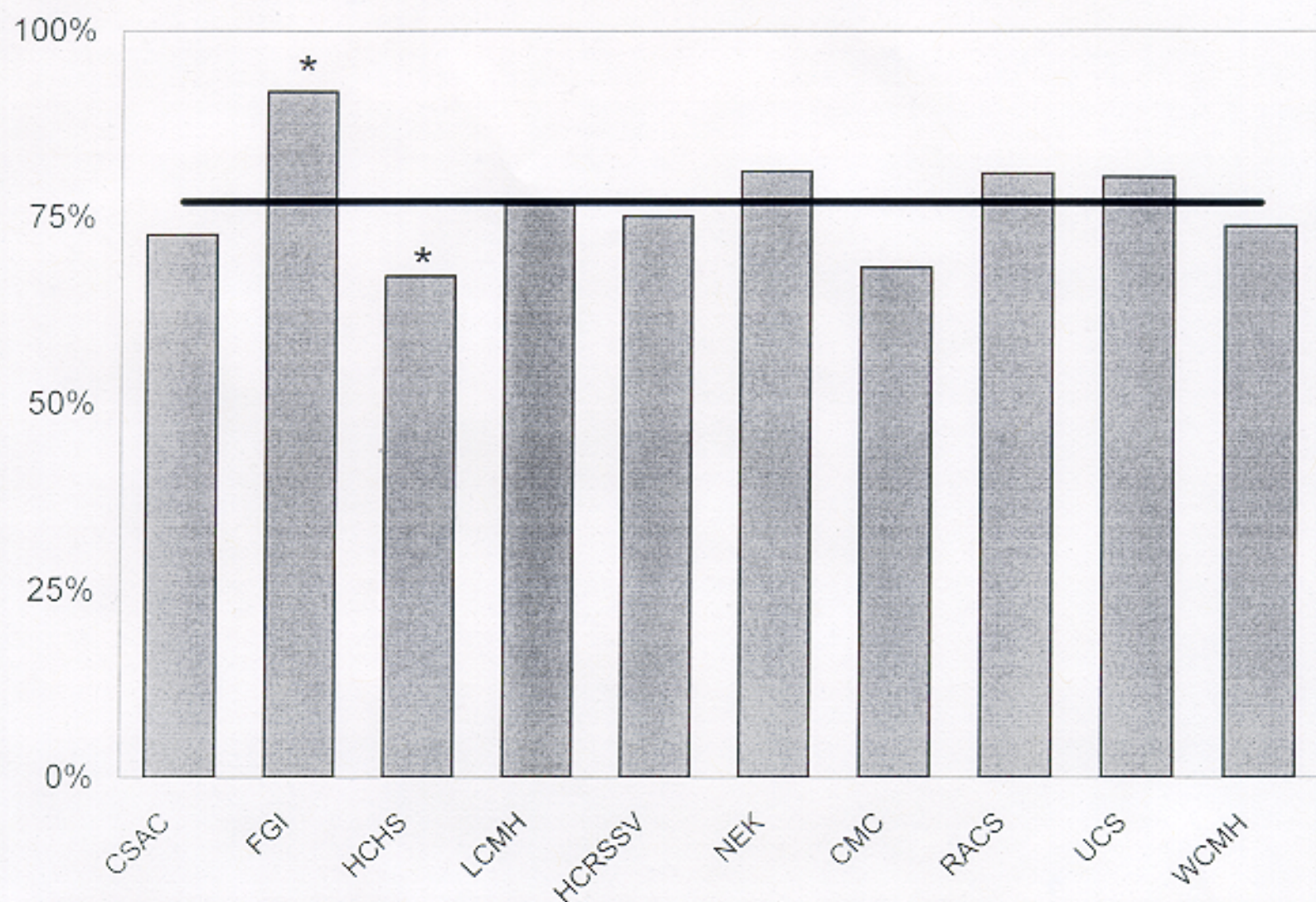
Agree

Undecided

Disagree

Strongly Disagree

Access to Service CRT Consumer Evaluation

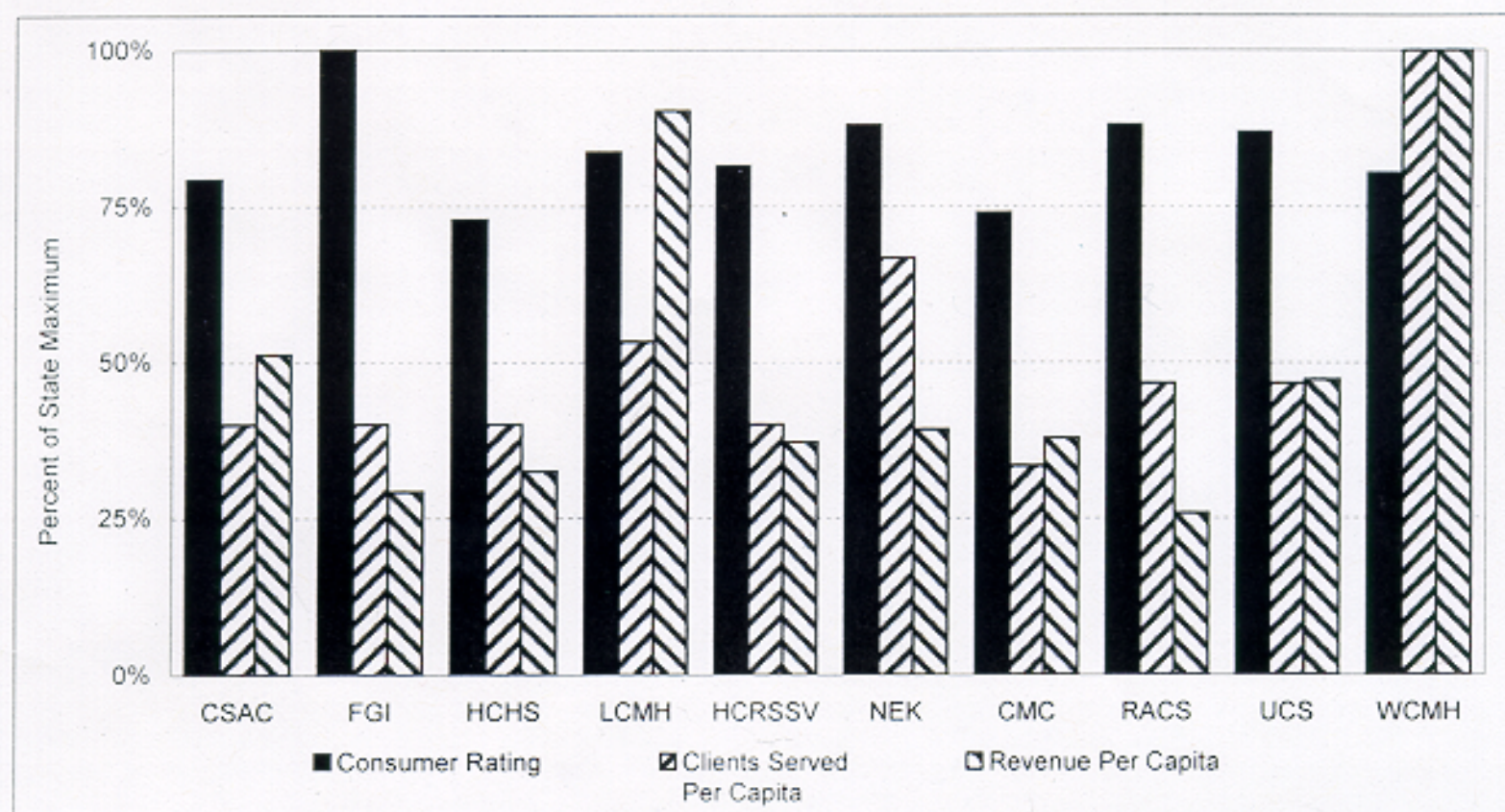


	Percent of Satisfaction	95% Confident Interval
CSAC	73%	(63% - 82%)
FGI	92%	(88% - 96%)
HCHS	67%	(62% - 72%)
LCMH	77%	(65% - 89%)
HCRSSV	75%	(71% - 80%)
NEK	81%	(77% - 86%)
CMC	68%	(57% - 79%)
RACS	81%	(75% - 86%)
UCS	80%	(74% - 87%)
WCMH	74%	(69% - 78%)
STATEWIDE	77%	(75% - 78%)

* $p < 0.05$.

Based on response to the 1997 DDMHS CRT consumer survey.

Comparison of Three Measures of Access **Community Rehabilitation & Treatment Programs: Vermont, FY 1997**



	Consumer Rating		Clients Served		Revenue	
	% Agreement	% of Max	Per Capita	% of Max	Per Capita	% of Max
CSAC	73%	79%	6	40%	\$54.28	51%
FGI	92%	100%	6	40%	\$30.90	29%
HCHS	67%	73%	6	40%	\$34.28	32%
LCMH	77%	84%	8	53%	\$95.51	90%
HCRSSV	75%	82%	6	40%	\$39.24	37%
NEK	81%	88%	10	67%	\$41.41	39%
CMC	68%	74%	5	33%	\$39.92	38%
RACS	81%	88%	7	47%	\$27.24	26%
UCS	80%	87%	7	47%	\$49.95	47%
WCMH	74%	80%	15	100%	\$105.75	100%

To facilitate comparison across CRT program, standardized measures of access to care are graphed. Each programs performance on each scale is presented as a percent of the maximum value in the state. The program with the highest value on each scale is presented as 100%. The performance of each other program is presented as a percentage of this value. Data sources: Consumer ratings are based on a five item scale measuring access to service in the 1997 DDMHS CRT Consumer Survey. Revenue per capita is based on financial statements submitted by CMHCs. Clients served per capita is based on Quarterly Service Reports submitted by CMHCs. Population estimates for 1997 are from the University of Vermont Center for Rural Studies.